

STATE OF SOUTH CAROLINA

(Caption of Case)

188573

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

COVER LETTER

DOCKET
NUMBER: 2004 - 48 - C

(Please type or print)

Submitted by: Spectrotel, Inc.

SC Bar Number: _____

Address: 655 Shrewsbury Avenue, Suite 210
Shrewsbury, NJ 07702Telephone: 732-345-7834Fax: 732-345-7893

Other: _____

Email: Stephen.wilson@spectrotel.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)

☐ Emergency Relief demanded in petition☐ Request for item to be placed on Commission's Agenda expeditiously☒ Other: Authorized Utility Representative Form

INDUSTRY (Check one)

NATURE OF ACTION (Check all that Apply)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Electric | <input type="checkbox"/> Affidavit | <input type="checkbox"/> Letter | <input type="checkbox"/> Request |
| <input type="checkbox"/> Electric/Gas | <input type="checkbox"/> Agreement | <input type="checkbox"/> Memorandum | <input type="checkbox"/> Request for Certification |
| <input type="checkbox"/> Electric/Telecommunications | <input type="checkbox"/> Answer | <input type="checkbox"/> Motion | <input type="checkbox"/> Request for Investigation |
| <input type="checkbox"/> Electric/Water | <input type="checkbox"/> Appellate Review | <input type="checkbox"/> Objection | <input type="checkbox"/> Resale Agreement |
| <input type="checkbox"/> Electric/Water/Telecom. | <input type="checkbox"/> Application | <input type="checkbox"/> Petition | <input type="checkbox"/> Resale Amendment |
| <input type="checkbox"/> Electric/Water/Sewer | <input type="checkbox"/> Brief | <input type="checkbox"/> Petition for Reconsideration | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Certificate | <input type="checkbox"/> Petition for Rulemaking | <input type="checkbox"/> Response |
| <input type="checkbox"/> Railroad | <input type="checkbox"/> Comments | <input type="checkbox"/> Petition for Rule to Show Cause | <input type="checkbox"/> Response to Discovery |
| <input type="checkbox"/> Sewer | <input type="checkbox"/> Complaint | <input type="checkbox"/> Petition to Intervene | <input type="checkbox"/> Return to Petition |
| <input checked="" type="checkbox"/> Telecommunications | <input type="checkbox"/> Consent Order | <input type="checkbox"/> Petition to Intervene Out of Time | <input type="checkbox"/> Stipulation |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Discovery | <input type="checkbox"/> Prefiled Testimony | <input type="checkbox"/> Subpoena |
| <input type="checkbox"/> Water | <input type="checkbox"/> Exhibit | <input type="checkbox"/> Promotion | <input type="checkbox"/> Tariff |
| <input type="checkbox"/> Water/Sewer | <input type="checkbox"/> Expedited Consideration | <input type="checkbox"/> Proposed Order | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Administrative Matter | <input type="checkbox"/> Interconnection Agreement | <input type="checkbox"/> Protest | _____ |
| <input type="checkbox"/> Other: | <input type="checkbox"/> Interconnection Amendment | <input type="checkbox"/> Publisher's Affidavit | _____ |
| | <input type="checkbox"/> Late-Filed Exhibit | <input checked="" type="checkbox"/> Report | |



2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32790-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

Docketing Department
South Carolina Public Service Commission
Synergy Business Park
101 Executive Center Dr.
Saluda Building
Columbia, SC 29210

RE: Spectrotel, Inc
SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative, filed on behalf of Spectrotel, Inc. No check is enclosed as there are no remittance fees due.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Trish Kirby
Compliance Reporting Specialist

cc: Stephen Wilson - Spectrotel, Inc
file: Spectrotel, Inc - Reporting - South Carolina

September 28, 2007
Via Overnight Delivery

SC PUBLIC SERVICE
COMMISSION

2007 OCT -1 AM 10:50

RECEIVED

AUTHORIZED UTILITY REPRESENTATIVE FORM

TYPE: ☐ IXC

☒ CLEC

☐ ILEC

☐ Water

☐ Sewer

CERTIFICATED COMPANY INFORMATION

Spectrotel, Inc.
Company Name

FEIN/SSN: [REDACTED]

Dbafka

Telephone #: 732-345-7000

Mailing Address: 655 Shrewsbury Avenue, Suite 210

Shrewsbury, NJ 07702
City, State, Zip Code

Same as above
Business Location

City, State, Zip Code County: Monmouth

REGISTERED AGENT INFORMATION

Registered Agent: National Registered Agents, Inc.

Mailing Address: 2 Office Park Court, Suite 103

Columbia, SC 29223
City, State, Zip Code

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A. Regulatory Officer: Stephen Wilson

732-345-7834 / 732-345-7893 / Stephen.wilson@spectrotel.com
Telephone Number / Facsimile Number / E-mail Address

B. Customer Complaints: Ken Gilbertson

732-345-7000 / 732-345-7893 / ken.gilbertson@spectrotel.com
Telephone Number / Facsimile Number / E-mail Address

CONTINUED ON BACK

C. Engineering Operations: _____

_____/_____/_____
 Telephone Number / Facsimile Number / E-mail Address

D. Test and Repair: _____

_____/_____/_____
 Telephone Number / Facsimile Number / E-mail Address

E. Emergencies: _____
 (During Non-Office Hours)

_____/_____/_____
 Telephone Number / Facsimile Number / E-mail Address

F. Financial: _____

_____/_____/_____
 Telephone Number / Facsimile Number / E-mail Address

G. Customer Contact (Toll Free) 888-773-9722

Stephen Wilson
 This form was completed by _____ Signature _____

Title: Accountant Date: 9/26/2007

RETURN COMPLETED FORM TO: Public Service Commission of SC
Docketing Department
 Post Office Drawer 11649
 Columbia, South Carolina 29211

And

Office of Regulatory Staff
Attn: Jeanne Gordon
 Post Office Box 11263
 Columbia, South Carolina 29211

(Rev. PSC05)

FORM RECEIVED SEP 27 2007